

**APPLICATION DATA SHEET****Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Title:: REMOVABLE KEYPAD FOR A PORTABLE  
COMMUNICATION DEVICE AND METHOD  
Attorney Docket Number:: MOT-CS22682RL  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 3  
Small Entity:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Brian  
Middle Name:: D.  
Family Name:: HONKALA  
City of Residence:: McHenry  
State or Providence of Residence:: IL  
Country of Residence:: US  
Street of Mailing Address:: 305 S. Driftwood Trail  
City of Mailing Address:: McHenry  
State or Providence of Mailing Address:: IL  
Postal or Zip Code of Mailing Address:: 60050

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Ted  
Middle Name:: E.  
Family Name:: KRAKOWIAK  
City of Residence:: Prospect Heights  
State or Providence of Residence:: IL  
Country of Residence:: US  
Street of Mailing Address:: 300 S. Parkway  
City of Mailing Address:: Prospect Heights  
State or Providence of Mailing Address:: IL  
Postal or Zip Code of Mailing Address:: 60070

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: R.  
Family Name:: ZEIGER  
City of Residence:: Mundelein  
State or Providence of Residence:: IL  
Country of Residence:: US  
Street of Mailing Address:: 220 W. Hawthorne Blvd.  
City of Mailing Address:: Mundelein  
State or Providence of Mailing Address:: IL  
Postal or Zip Code of Mailing Address:: 60060

**Correspondence Information**

Correspondence Customer Number:: 35813  
Name:: Design IP – DEPT MOT  
Phone Number:: 215-988-9577  
Fax Number:: 215-243-8292  
E-Mail Address:: damonneagle@designip.com

**Representative Information**

Representative Customer Number::	35813
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**Assignee Information**

Assignee Name:: Motorola, Inc.  
Street of Mailing Address:: 1303 East Algonquin Road  
City of Mailing Address:: Schaumburg  
State or Providence of Mailing Address:: IL  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 60196